

City of Richfield
Mechanical Permit Application

Office use only

Job Site Address: _____ Unit # _____ Tenant/Bldg Name _____

Project Valuation: \$_____ The Applicant Is: ☐ Owner and Occupant ☐ Contractor
TOTAL PROJECT VALUATION TO INCLUDE ALL MECHANICAL EQUIPMENT AND LABOR NECESSARY FOR JOB COMPLETION, WHETHER FURNISHED BY CONTRACTOR, OWNER OR OTHERS

Property Owner *Required*

Name _____
Address _____ Unit # _____
City _____ State _____ Zip _____
Phone () _____ Cell Phone () _____

Contractor/Applicant

Name _____
Address _____ E-Mail Address _____
City _____ State _____ Zip _____
Phone () _____ Cell Phone () _____ License # _____

Property Use	Type of Work	
<input type="checkbox"/> Single Family Residential <input type="checkbox"/> Duplex* <i>*(separate permit required for each unit)</i> <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Remodel/Alteration <input type="checkbox"/> Furnace <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Move Gas Meter to Exterior	<input type="checkbox"/> Furnace/Air Conditioner <input type="checkbox"/> Airport Noise Mitigation <input type="checkbox"/> Refrigeration <input type="checkbox"/> Electrical Contractor <input type="checkbox"/> Gas Fireplace

Mechanical Item(s) (check all that apply)

<input type="checkbox"/> Air Conditioning <input type="checkbox"/> Boiler <input type="checkbox"/> Chimney / Flue <input type="checkbox"/> Ductwork <input type="checkbox"/> Gas Fireplace	<input type="checkbox"/> Furnace <input type="checkbox"/> Piping - Gas <input type="checkbox"/> Piping - Medical <input type="checkbox"/> Piping- Steam/ Hot Water	<input type="checkbox"/> Refrigeration <input type="checkbox"/> Rooftop Unit <input type="checkbox"/> Space / Unit Heater <input type="checkbox"/> Temporary Heating Unit	<input type="checkbox"/> Ventilation <input type="checkbox"/> Other _____ <input type="checkbox"/> BTU Input _____ <input type="checkbox"/> Output _____	
Commercial Only	Manufacturer	Model	Tons	Manufacturer Efficiency Rating

Specific Description of Work to be Completed

This permit may be issued only to a licensed mechanical contractor or to an owner who occupies the single-family dwelling. A duplex is not a single-family dwelling. (City Code 400.10)

I hereby apply for a mechanical permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Richfield and with the Minnesota Mechanical Code.

Applicant's Signature

Date

Mechanical Permit Fees	Conditions of Issuance
<p>Mechanical Permit Fee: _____</p> <p>Additional Inspection: _____</p> <p>State Surcharge: _____ .0005 X valuation \$1,000,000.00 or less <i>(Call the Inspections Department at 612-861-9860 for state surcharges on all permits valued \$1,000,000.00 or more).</i></p> <p>Investigation Fee: _____</p> <p>TOTAL FEES DUE: _____</p>	<p><i>(office use only)</i></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Approved by: _____</p> <p>Date: _____</p>

Required Inspections	Fees
<input type="checkbox"/> Final <input type="checkbox"/> No Insp. Req'd <input type="checkbox"/> Orsat <input type="checkbox"/> Gas Line Air Test <input type="checkbox"/> Rough-In Ductwork <input type="checkbox"/> Investigation <input type="checkbox"/> Questions at Site <input type="checkbox"/> Equipment Start-Up Test <input type="checkbox"/> Temp C/O <input type="checkbox"/> Routine	<p><u>RESIDENTIAL: ONE & TWO FAMILY DWELLINGS</u> 1.5% of jobcost Minimum of \$35.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><u>COMMERCIAL, INDUSTRIAL, MULTI-FAMILY</u> 1.5% of jobcost Minimum of \$45.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><u>SURCHARGE</u> - .0005 X Total Jobcost (1,000,000.00 or less)</p>



City of Richfield
 6700 Portland Avenue South
 Richfield, MN 55423
 (612) 861-9860
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